

NEW MEDI-CAL NATIONAL PROVIDER IDENTIFIER (NPI) ONLY EDITS

Attention: FEE-FOR-SERVICE EDI PROVIDERS/BILLING

AGENTS ONLY

STOP – Impact to You

Effective May 23, 2008, State Department of Mental Health will begin rejecting all Medi-Cal claims submitted without a valid National Provider Identifier (NPI) number in the primary Billing and Rendering Provider fields.

CAUTION - What You Need to Know

Effective Monday, May 19, 2008, the Integrated System (IS) will begin validating all Medi-Cal claims to ensure a structurally "valid" NPI exists for both the primary billing and rendering provider fields.



If an "invalid" NPI exists or is missing for either or both the primary billing (2010AA_NM108 and NM109) and rendering (2310B_NM108 and NM109) provider field(s) in the IS a negative 835 Reason Code 206 will appear on the IS Reports. The IS will deem claims invalid if the NPI is not 10 digits or if the NPI fails the NPI Algorithm check digit. Therefore, providers and billing agents must ensure that the NPI number submitted is valid and was assigned by the National Plan and Provider Enumeration System.

Additionally, if the NPI for either or both the primary billing (2010AA_NM108 and NM109) and rendering (2310B_NM108 and NM109) provider field(s) on the claim do not match the NPI in the IS, a negative 835 Reason Code 208 will appear on the IS Reports.

DMH cannot confirm the accuracy of the NPI on the claim. DMH can only confirm that its structure is correct and that it matches what was entered into the IS. It remains the provider's responsibility to verify that the correct NPI is in the IS and on their claims.

GO - What You Need to Do

In order to meet the State's deadline of May 23, 2008, we need EDI FFS Network Providers and billing agents to begin sending test files to the Department's EDI Support

Unit to begin testing for syntax errors. This will be a basic HIPAA syntax validation. Beginning on Wednesday, May 14, 2008, the Department will be ready to run files, test NPI programming changes and the new error codes in the Downey Test Region and the IS.

Upon the submission of one batch that successfully passes all NPI logic, FFS Network Providers and billing agents will be ready to submit into production beginning on Monday, May 19, 2008.

EDI FFS Network Providers and billing agents will have until 7 p.m. on Thursday, May 15, 2008, to upload their EDI batches in the standard mode and/or current format. The SFT site will be brought down beginning on Thursday, May 15, 2008, after 7 p.m. and will not be available until the morning of Monday, May 19, 2008. On Monday, May 19, 2008, when the SFT site becomes available, all EDI FFS Network Providers and billing agents will be required to only submit their batches in the NPI Only Mode.

<u>Please note</u>: It is anticipated that Medi-Cal claim batches submitted on or after May 19, 2008, will be sent to the State during the week of June 2, 2008. Therefore, please ensure any claims reaching the 6-month billing time limit have a proper late code or are submitted prior to May 19, 2008.

If the Billing Provider and Rendering Provider NPI numbers do not exist or are invalid in the IS, FFS Network Providers and/or billing agents will need to contact the Provider Relations Unit at (213) 738-3311.

Provider Relations Unit staff will require a faxed NPI number notification/confirmation, completion and submission of a Rendering Provider Form to either add or correct provider information in the IS.

The Rendering Provider Form may be faxed to (213) 351-2024 or mailed to the address listed below:

Medi-Cal Professional Services – Provider Relations Unit Attention: Kathy S. Jones 550 South Vermont Avenue, 7th Floor, Room 704 Los Angeles, CA 90020

The Rendering Provider Form and instructions may be downloaded at the following website: http://dmh.lacounty.gov/hipaa/ffs ISForms.htm.

If you have any questions regarding the new Medi-Cal NPI edits, please contact the Provider Relations Unit at (213) 738-3311.